

# Jennifer Beth Turken Award

## “Acts of Kindness”

September   October   November   December   January  
February   March   April   May  
(Please circle the month of nomination)

Child's Name \_\_\_\_\_

Grade \_\_\_\_\_ Teacher's Name \_\_\_\_\_

Nominating Staff Member \_\_\_\_\_

Write 3-5 sentences describing the act of kindness  
this nominee demonstrated towards another child.

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---